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\*BIBDATASHEET\*

CONFIRMATION NO. 8918

Bib Data Sheet

SERIAL NUMBER 10/687,059	FILING DATE 10/15/2003 RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. LCWO-1-1001
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 01/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	WA	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature 	Initials 	3	20	3

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TITLE

Diaper changing apparatus and methods

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other
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